

See Attached

(6)
7/23/01
Jc

UNITED STATES DISTRICT COURT
FOR THE
MIDDLE DISTRICT OF PENNSYLVANIA

BRIAN K. GARRIES, a/k/a, :
Pharaoh O. Nkosi :
Petitioner : CIVIL NO. 1:CV-01-1119
v. : (Judge Kane)
DONALD ROMINE, Warden, :
Respondent :
:

FILED
HARRISBURG, PA

JUL 18 2001

O R D E R

MARY E. D'ANDREA, CLERK
Per _____
Deputy Clerk

NOW, THIS 17th DAY OF JULY, 2001, IT IS HEREBY ORDERED THAT:

1. The Clerk of Court is directed to serve a copy of the above-captioned petition for writ of habeas corpus on Respondent and the United States Attorney.
2. Within twenty (20) days of the date of this order, Respondent shall respond to the allegations in the petition.
3. A determination whether Petitioner should be produced for a hearing will be held in abeyance pending submission of a response.
4. Petitioner shall, if he so desires, file a reply to the response within fifteen (15) days of its

filings.



YVETTE KANE
United States District Judge

YK:dlb

UNITED STATES DISTRICT COURT
FOR THE
MIDDLE DISTRICT OF PENNSYLVANIA

* * MAILING CERTIFICATE OF CLERK * *

July 19, 2001

Re: 1:01-cv-01119 Garries v. Romine

True and correct copies of the attached
to the following:

Brian K. Garries
USP-LEW
U.S. Penitentiary at Lewisburg
#11388-045
P.O. Box 1000
Lewisburg, PA 17837

CC:
 Judge (✓)
 Magistrate Judge ()
 U.S. Marshal ()
 Probation ()
 U.S. Attorney ()
 Atty. for Deft. ()
 Defendant ()
 Warden ()
 Bureau of Prisons ()
 Ct Reporter ()
 Ctroom Deputy ()
 Orig-Security ()
 Federal Public Defender ()
 Summons Issued ()
 Standard Order 93-5 ()
 Order to Show Cause (✓)
 Bankruptcy Court ()
 Other _____ ()

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

3555		Postmark Here
0111	Postage \$	
0120	Certified Fee	
0120	Return Receipt Fee (Endorsement Required)	
0120	Restricted Delivery Fee (Endorsement Required)	
0520	Total Postage & Fees \$	
Recipient's Name (Please Print Clearly) (To be completed by mailer)		
John H. Harcourt, Atty. General		
Street, Apt. No., or PO Box No.		
10th + Constitution Ave.		
Washington, DC 20530		

PS Form 3800, February 2000 See Reverse for Instructions

0521		See Reverse for Instructions
0520	Recipient's Name (Please Print Clearly) (To be completed by mailer)	
0520	Street, Apt. No., or PO Box No.	
0520	PO Box 11764	
0520	City, State, ZIP+4	
0520	HUNNA 17108	

PS Form 3800, February 2000 See Reverse for Instructions

0521		See Reverse for Instructions
0520	Recipient's Name (Please Print Clearly) (To be completed by mailer)	
0520	Street, Apt. No., or PO Box No.	
0520	PO Box 1000	
0520	City, State, ZIP+4	
0520	Lewisburg, PA 17837	

PS Form 3800, February 2000 See Reverse for Instructions

with N/C attached to complt. and served by:
 U.S. Marshal () Pltf's Attorney ()
 to: US Atty Gen (✓) PA Atty Gen ()
 DA of County () Respondents (✓)

MARY E. D'ANDREA, Cle

DATE: 7-19-01

BY:

Deputy Clerk